


LEE COUNTY SUPERVISOR OF ELECTIONS CANDIDATE CAMPAIGN FILE COVER SHEET

*08JUN17PM014850E Lee Co F1

Candidate Name	Steve Lohan		
Residence Address	22101 Edenbridge Ct.		
City and Zip Code	Bonita Springs 34135		
Mailing Address (if different)	<input checked="" type="checkbox"/> Check if same as above.		
Telephone Number(s) (Daytime)	239 450 4773	OR	992 4725
Email Address	LohanPI@comcast.net		
Office Sought	Fire Commissioner		
Area, District, Group Or Seat Number	Bonita Springs 5-4		
Political Party (If Applicable)			
Date Of Birth Or Voter ID #	84-017828		
Date	6/11/08		
Candidate Signature	X 		

All information on this form, including your signature, becomes a public record upon receipt by the Supervisor of Elections.

Candidates who provide an email address may be contacted by this office, via the email address provided by the candidate, for campaign related communications that pertain exclusively to the candidate's campaign.

All other mailings from this office, which pertain to every candidate, will be via United States Postal Service.

SCANNED

STATE OF FLORIDA
APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES
(Section 106.021(1), F.S.)

OFFICE USE ONLY

(PLEASE TYPE)

CHECK APPROPRIATE BOX:

Original Appointment Deputy Treasurer Reappointment of Treasurer Secondary Depository

Name of Candidate

Steve Lohan

1. Address (include post office box or street, city, state, zip code)

27101 Edenbridge Ct.
Bonita Springs, FL 34135

Telephone (optional)

(239) 992-4725

2. Party (Partisan candidates only)

3. Office (add district, circuit, group number)

Bonita Springs Fire Commission Seat 4

I have appointed the following person to act as my

Campaign Treasurer Deputy Treasurer

4. Name of Treasurer or Deputy Treasurer

Susan Wulber

5. Mailing Address (If post office box or drawer add street address)

20037 Buttermere Court

6. Telephone

7. City

Estero

8. County

Lee

9. State

FL

10. Zip Code

33928

I have designated the following named bank as my

Primary Depository Secondary Depository

11. Name of Bank

Wachovia

12. Street Address

26791 S Tamiami Trail

13. City

Bonita Springs

14. County

Lee

15. State

FL

16. Zip Code

34134

17. Signature of Candidate

X *Steve Lohan*

Date

7/18/2008

Campaign Treasurer's Acceptance of Appointment

I, Susan Wulber, do hereby accept the appointment as
(Please Print or Type)

Campaign Treasurer Deputy Treasurer for the campaign of Steve Lohan

who is seeking nomination or election as a _____ candidate to the office of _____
(Party)

Bonita Springs Fire Commission Seat 4 . As a duly registered voter in Lee

County, Florida, I am qualified to accept this appointment.

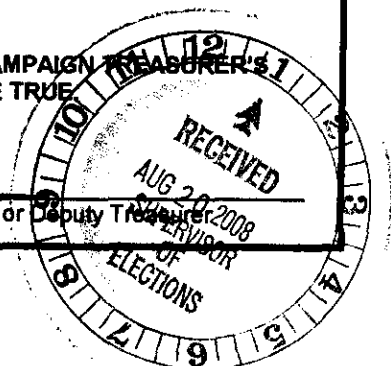
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE

7-18-2008

Date

X *Susan Wulber*

Signature of Campaign Treasurer or Deputy Treasurer



STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please Type)

OFFICE USE ONLY

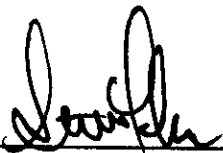
I, Steve Lohan,

candidate for the office of Bonita Springs Fire Commission Seat 4;

have received, read and understand the requirements of Chapter 106,

Florida Statutes.

X



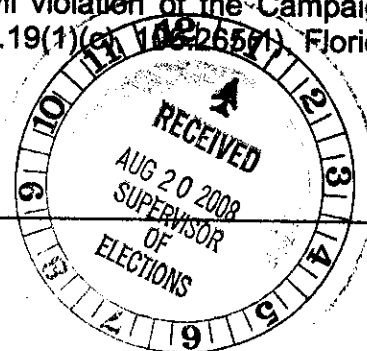
Signature of Candidate

8/19/08

Date

AUG 20 2008

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1) and 106.265(1) Florida Statutes).



OFFICE USE ONLY

**STATEMENT OF
CANDIDATE**

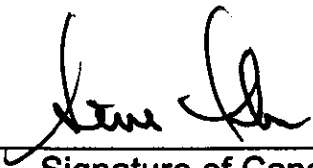
(Section 106.023, F.S.)

(Please Type)

08JUN17PM0148 SDE Lee Co Fl

I, Steve Lohan
candidate for the office of Bouita Springs Fire Commissioner ^{S-4}

have received, read and understand the requirements of Chapter 106,
Florida Statutes.

X 
Signature of Candidate

6/11/08
Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).

SCANNED

AFFIDAVIT OF INTENT LEE COUNTY SPECIAL DISTRICT CANDIDATE

08 JUN 17 PM 01:48:50E Lee Co Fl

State of Florida
County of Lee

I, Steve Lohan, am a candidate for the Special District
(print name)


office of: Bonita Springs Fire Commissioner S-4
(district name and district #, seat #, or area#)

in the November 08 election. I understand that my only campaign
(date of election)

expense, from personal funds, shall be the \$25 candidate-qualifying-fee or the signature verification fee for candidates who qualify by submitting 25 valid candidate petition signatures.

As long as these are my only campaign expenses, I will not be required to: appoint a campaign treasurer, designate a campaign depository or file periodic campaign treasurer's reports as required by Florida Statutes §99.061 or §106.07 and, therefore, during my campaign, I am prohibited from expending, collecting, soliciting or accepting any money or contribution(s) in-kind, in connection with my campaign.

In the event I later decide to, collect, solicit, or accept any money or contribution(s) in-kind, or make any campaign expense, prior to doing so, I understand that I AM REQUIRED TO FIRST FILE Form DS-DE 9 (Appointment of Campaign Treasurer/Designation of Campaign Depository Form) with the Lee County Supervisor of Elections. My campaign shall then be subject to campaign finance regulations in accordance with Florida Statutes, Chapter 106 and I will be required to file periodic campaign treasurer's reports as required by Florida Statute §106.07 with the Lee County Supervisor of Elections.

X 
Signature of Candidate

6/11/08
Date

FS 106.021(1)(a) "No person shall accept any contribution or make any expenditure with a view to bringing about his or her nomination, election, or retention in public office, or authorize another to accept such contributions or make such expenditure on the person's behalf, unless such person has appointed a campaign treasurer and designated a primary campaign depository."

SCANNED

**LOYALTY OATH FOR
NON-PARTISAN OFFICE**

(Sections 876.05-876.10, Florida Statutes)

STATE OF FLORIDA

Lee COUNTY

OFFICE USE ONLY

LOHAN, STEVE
NON PARTISAN
FIRE COMMISSION
BONITA SPRINS
SEAT 4

I,

<u>Steve</u>	<u>M</u>	<u>Lohan</u>
First Name	Middle Name/Initial	Last Name

a citizen of the State of Florida and of the United States of America, . . . and a candidate for public office . . . do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

OATH OF CANDIDATE

(Section 99.021, Florida Statutes)

I,

Steve Lohan

(PLEASE PRINT NAME AS YOU WISH IT TO BE WRITTEN IN ON THE BALLOT — NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the office of Bonita Springs Fire Comm. 5-4
(office) (district) (group)

My legal residence is Lee County, Florida. I am qualified

under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected. I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes.

X

[Signature]

(239) 450 4723 LohanPI@concept.net

Signature of Candidate

Daytime Telephone Number

Email Address

27101 Edenbridge Ct. Bonita Springs FL 34135

Address

City

State

ZIP Code

Sworn to (or affirmed) and subscribed before me this 12 day of June, 2008.

Personally Known: or

Produced Identification: _____

Type of Identification Produced: _____

[Signature]

Signature of Notary Public - State of Florida
Print, Type or Stamp Commissioned Name of Notary Public



MARTHA M. MAZZITELLI
MY COMMISSION # DD 726299
EXPIRES: October 18, 2011
Bonded Thru Budget Notary Services

Please print or type your name, mailing address, agency name, and position below:

FINANCIAL INTERESTS

LAST NAME -- FIRST NAME -- MIDDLE NAME :

Lohan Steve M

MAILING ADDRESS :

27101 Edenbridge Ct

Bonita Springs 34135 Lee

CITY : ZIP : COUNTY :

NAME OF AGENCY :

Bonita Springs Fire Commissioner

NAME OF OFFICE OR POSITION HELD OR SOUGHT :

S-4

FOR OFFICE USE ONLY:

ID Code

ID No.

Conf. Code

P. Req. Code

08JUN17PM01485DE Lee Co FI

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.

CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE

BOTH PARTS OF THIS SECTION MUST BE COMPLETED

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (check one):

DECEMBER 31, 2007 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: _____

MANNER OF CALCULATING REPORTABLE INTERESTS:

THE LEGISLATURE ALLOWS FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check one):

COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS

PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person]

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
Imperial Golf Club	1800 Imperial Golf Cs. Blvd. Naples FL 34110	GOLF

PART B -- SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person]

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
N/A			

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person]

27101 Edenbridge Ct Bonita Springs FL 34135

FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.

INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.

OTHER FORMS you may need to file are described on page 6.

SCANNED

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]

TYPE OF INTANGIBLE

BUSINESS ENTITY TO WHICH THE PROPERTY RELATES

N/A

PART E — LIABILITIES [Major debts]

NAME OF CREDITOR

ADDRESS OF CREDITOR

Chase

PO Box 900187, Louisville KY 40290-1871

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership or positions in certain types of businesses]

	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	N/A		
ADDRESS OF BUSINESS ENTITY			
PRINCIPAL BUSINESS ACTIVITY			
POSITION HELD WITH ENTITY			
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS			
NATURE OF MY OWNERSHIP INTEREST			

IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

SIGNATURE (required):



DATE SIGNED (required):

6/22/08

FILING INSTRUCTIONS:

WHAT TO FILE:

After completing all parts of this form, including signing and dating it, send back only the first sheet (pages 1 and 2) for filing.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

Facsimiles will not be accepted.

NOTE:

MULTIPLE FILING UNNECESSARY:

Generally, a person who has filed Form 1 for a calendar or fiscal year is not required to file a second Form 1 for the same year. However, a candidate who previously filed Form 1 because of another public position must at least file a copy of his or her original Form 1 when qualifying.

WHERE TO FILE:

If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.)

State officers or specified state employees file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 3600 Maclay Blvd. South, Suite 201, Tallahassee, FL 32312.

Candidates file this form together with their qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

WHEN TO FILE:

Initially, each local officer/employee, state officer, and specified state employee must file **within 30 days** of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

Candidates for publicly-elected local office must file at the same time they file their qualifying papers.

Thereafter, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.

Finally, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment.

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

OFFICE USE ONLY 123

FINAL REPORT

(1) STEVE LOHAN
Name

(2) 27101 EDENBRIDGE CT, BONITA SPRINGS, FL 34135
Address (number and street)

City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): BONITA SPRINGS FIRE-4

Political Committee

CHECK IF PC HAS DISBANDED

Committee of Continuous Existence

CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication

CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 10/31/2008 To 2/2/2009 / Report Type TR-4

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 0.00

Loans \$ 0.00

Total Monetary \$ 0.00

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 241.16

Transfers to Office Account \$ 0.00

Total Monetary \$ 241.16

(8) Other Distributions \$ 0.00

(9) TOTAL Monetary Contributions To Date
\$ 1,507.90

(10) TOTAL Monetary Expenditures To Date
\$ 1,707.90

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete.

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Susan Wilber

(Type name) Steve Lohan

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X Susan Wilber

X Steve Lohan

Signature

Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name STEVE LOHAN

(2) I.D. Number 123

(3) Cover Period 10/31/2008 through 2/2/2009

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
11/17/2008 / /	Lohan, Steve 27101 Edenbridge Court Bonita Springs, FL 34135	close account	DI		\$241.16
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**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) STEVE LOHAN
Name

(2) 27101 EDENBRIDGE CT, BONITA SPRINGS, FL 34135
Address (number and street)

City, State, Zip Code

OFFICE USE ONLY 123

*080CT31PM1045SDELEae Co FL

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): BONITA SPRINGS FIRE-4

Political Committee CHECK IF PC HAS DISBANDED

Committee of Continuous Existence CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 10/11/2008 To 10/30/2008 Report Type G4

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 235.00

Loans \$ 0.00

Total Monetary \$ 235.00

In-Kind \$ 250.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 793.84

Transfers to Office Account \$ 0.00

Total Monetary \$ 793.84

(8) Other Distributions

\$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 1,507.90

(10) TOTAL Monetary Expenditures To Date

\$ 1,466.74

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Susan Wulber

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X Susan Wulber

Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Steve Lohan

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X Steve Lohan

Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name STEVE LOHAN (2) I.D. Number 123
 10/11/2008 through 10/30/2008
 (3) Cover Period / / through / / (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		Amount
10/16/2008 / / 1	Goldie, James M 264 Barefoot Beach Blvd. #202 Bonita Springs, FL 34134	I	retired	CH			\$100.00
10/19/2008 / / 2	Fitzgerald, Barbara I 13100 Southampton Dr. Bonita Springs, FL 34135	I	retired	IK	meet the candidate party		\$250.00
10/22/2008 / / 3	Ball, Scott 8231 Bay Colony Dr. Apt 604 Naples, FL 34108	I	retired	CH			\$50.00
10/22/2008 / / 4	Healy, Jerry 13970 Southampton Dr. Apt 4602 Bonita Springs, FL 34135	I		CH			\$15.00
10/22/2008 / / 5	Kosak, Anthony 13781 Southampton Dr. Bonita Springs, FL 34135	I		CH			\$25.00
10/29/2008 / / 6	Baker, Arthur 13390 Bridgeford Ave. Bonita Springs, FL 34135	I		CH			\$20.00
10/29/2008 / / 7	Rudd, Peter 13870 Tonbridge Ct. Bonita Springs, FL 34135	I		CH			\$25.00
/ /							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name STEVE LOHAN

(2) I.D. Number 123

(3) Cover Period 10/11/2008 through 10/30/2008

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
10/17/2008 / /	Bonita Banner, 26381 S. Tamiami Trail Bonita Springs, FL 34134	advertisi ng	MO		\$793.84
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**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) STEVE LOHAN
Name

(2) 27101 EDENBRIDGE CT, BONITA SPRINGS, FL 34135
Address (number and street)

City, State, Zip Code

OFFICE USE ONLY 123

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: _____

(4) Check appropriate box(es):

Candidate (office sought): BONITA SPRINGS FIRE-4

Political Committee CHECK IF PC HAS DISBANDED

Committee of Continuous Existence CHECK IF CCE HAS DISBANDED

Party Executive Committee

Electioneering Communication CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

(5) REPORT IDENTIFIERS

Cover Period: From 9/27/2008 To 10/10/2008 Report Type G3

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 425.00

Loans \$ 597.90

Total Monetary \$ 1,022.90

In-Kind \$ 0.00

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 597.90

Transfers to Office Account \$ 0.00

Total Monetary \$ 597.90

(8) Other Distributions

\$ 0.00

(9) TOTAL Monetary Contributions To Date

\$ 1,272.90

(10) TOTAL Monetary Expenditures To Date

\$ 672.90

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Susan Wulber

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X Susan Wulber
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Steve Lohan

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X Steve Lohan
Signature

CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name STEVE LOHAN (2) I.D. Number 123

9/27/2008 10/10/2008

(3) Cover Period / / through / / (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type	(8) Occupation	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
10/5/2008 / /	McCourt, Patrick J 6000 Seagrape Ln Bonita Springs, FL 34134	I	retired	CH			\$200.00
1							
10/4/2008 / /	Holst, Richard A 26435 Bay Rd Bonita Springs, FL 34134	I		CH			\$50.00
2							
10/4/2008 / /	Bachrach, Jan 26749 McLaughlin Blvd Bonita Springs, FL 34134	I		CH			\$50.00
3							
10/4/2008 / /	Fitzgerald, Edward 13100 Southampton Dr Bonita Springs, FL 34135	I		CH			\$100.00
4							
10/4/2008 / /	Sawyer, Kimberly P O Box 5345 Saginaw, MI 48608	I		CH			\$25.00
5							
10/3/2008 / /	Lohan, Steve 27101 Edenbridge Ct. Bonita Springs, FL 34135	I	hospitali ty mgt <b	LO			\$597.90
6							
/ /							
/ /							

CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name STEVE LOHAN

(2) I.D. Number 123

(3) Cover Period 9/27/2008 through 10/10/2008

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
10/3/2008 / /	Bonita Springs Main PO, Bonita Springs, FL	postage and envelopes	MO		\$597.90
1					
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**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) STEVE LOHAN
Name

(2) 27101 EDENBRIDGE CT, BONITA SPRINGS, FL 34135
Address (number and street)

City, State, Zip Code

CHECK IF ADDRESS HAS CHANGED

OFFICE USE ONLY 123

RECEIVED

OCT 2 2008

(3) ID Number: LEE COUNTY ELECTIONS

(4) Check appropriate box(es):

Candidate (office sought): BONITA SPRINGS FIRE-4

Political Committee CHECK IF PC HAS DISBANDED

Committee of Continuous Existence CHECK IF CCE HAS DISBANDED

Party Executive Committee CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED

Electioneering Communication

(5) REPORT IDENTIFIERS

Cover Period: From 9/13/2008 To 9/26/2008 Report Type G2

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks	\$	<u>0.00</u>
Loans	\$	<u>0.00</u>
Total Monetary	\$	<u>0.00</u>
In-Kind	\$	<u>394.85</u>

(7) EXPENDITURES THIS REPORT

Monetary Expenditures	\$	<u>75.00</u>
Transfers to Office Account	\$	<u>0.00</u>
Total Monetary	\$	<u>75.00</u>

(8) Other Distributions
\$ 0.00

(9) TOTAL Monetary Contributions To Date
\$ 250.00

(10) TOTAL Monetary Expenditures To Date
\$ 75.00

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Susan Wulber

Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X Susan Wulber
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Steve Lohan

Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X Steve Lohan
Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name STEVE LOHAN (2) I.D. Number 123

9/13/2008 through 9/26/2008

(3) Cover Period / / through / / (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor		(9) Contribution	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type			
9/16/2008 / /	Arnal, Neil 27670 Hickory Blvd. Bonita Springs, FL 34134	I	retired	IK	yard signs		\$394.85
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CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES

(1) Name STEVE LOHAN

(2) I.D. Number 123

9/13/2008 through 9/26/2008

(3) Cover Period / / through / /

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
9/23/2008 / /	Supervisor of Elections, P O Box 2545 Fort Myers, FL 33902	subscript ion for absentee ballot list	MO		\$75.00
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**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) Steve Lohan
Name
(2) 27101 Edenbridge Ct.
Address (number and street)
Bonita Springs, FL 34135
City, State, Zip Code

OFFICE USE ONLY

CHECK IF ADDRESS HAS CHANGED

(3) ID Number: 123

(4) Check appropriate box(es):
 Candidate (office sought): Bonita Springs Fire-4
 Political Committee CHECK IF PC HAS DISBANDED
 Committee of Continuous Existence CHECK IF CCE HAS DISBANDED
 Party Executive Committee CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED
 Electioneering Communication

(5) REPORT IDENTIFIERS

Cover Period: From 8 122 108 To 9 112 108 Report Type G1

Original Amendment Special Election Report Independent Expenditure Report

(6) CONTRIBUTIONS THIS REPORT

Cash & Checks \$ 250.00

Loans \$ _____

Total Monetary \$ 250.00

In-Kind \$ _____

(7) EXPENDITURES THIS REPORT

Monetary Expenditures \$ 0

Transfers to Office Account \$ 0

Total Monetary \$ 0

(8) Other Distributions \$ 0

(9) TOTAL Monetary Contributions To Date
\$ 250.00

(10) TOTAL Monetary Expenditures To Date
\$ 0

(11) CERTIFICATION

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Susan Wulber
 Individual (only for electioneering commun.) Treasurer Deputy Treasurer

X Susan Wulber
Signature

I certify that I have examined this report and it is true, correct, and complete.

(Type name) Steve Lohan
 Candidate Chairperson (only for PC, PTY & electioneering commun. organization)

X Steve Lohan
Signature



CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name Steve Lohan (2) I.D. Number 123

(3) Cover Period 8/22/08 through 9/12/08 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		Amount
9/4/08 1	Susan Wulber 20037 Buttermere Ct Estero, FL 33928	I	feattor	check			200.00
9/5/08 2	Michael Oliveri 1951 Imperial Golf Course Blvd Naples, FL 34110	I	retired	check			50.00
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